

# Summer Food Service Program (SFSP) Pre-operational Site Visit Form

**Instructions:** Prior to the SFSP opening date, a SFSP sponsor representative must visit all **new sites** and all sites determined to have **operational problems** in the previous year. Complete and maintain a “Pre-operational Site Visit” form for each required site visit. *Document only **one** pre-operational site visit per form.*

Sponsor name: \_\_\_\_\_ Date of review: \_\_\_\_\_  
Site name: \_\_\_\_\_ Site number: \_\_\_\_\_  
Address: \_\_\_\_\_ Monitor’s arrival time: \_\_\_\_\_  
Phone: \_\_\_\_\_ Monitor’s departure time: \_\_\_\_\_  
Site supervisor: \_\_\_\_\_

1. Type of site (*check one*):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Boys & Girls Club     | <input type="checkbox"/> Housing complex    | <input type="checkbox"/> Salvation Army                  |
| <input type="checkbox"/> Child Care/Head Start | <input type="checkbox"/> Library            | <input type="checkbox"/> School                          |
| <input type="checkbox"/> Faith Based           | <input type="checkbox"/> Parks & Recreation | <input type="checkbox"/> YMCA/YWCA                       |
| <input type="checkbox"/> Farmers’ Market       | <input type="checkbox"/> Playground         | <input type="checkbox"/> Other ( <i>specify</i> ): _____ |

2. Estimated number of children the site could serve: \_\_\_\_\_

3. Estimated number of at-risk children in the area: \_\_\_\_\_

4. Estimated number of personnel needed to adequately control the food service: \_\_\_\_\_

5. Are the present facilities adequate for an organized meal service?

- ☐ Yes  
☐ No (*please explain*): \_\_\_\_\_

6. For the estimated number of children, does the site have:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| Shelter for inclement weather?                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Adequate cooking facilities (if applicable)?     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Adequate storage for prepared or delivered food? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Storage space for records at site?               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Adequate refrigeration?                          | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Access to a telephone?                           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

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7. What types of organized activities are possible or planned at this site?

8. Improvements or corrective actions needed before the site opens:

I certify that the above information is correct.

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Monitor's signature

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Date

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For information on the SFSP, visit the CSDE's [SFSP](#) webpage or contact the [Summer Meals staff](#) in the CSDE's Bureau of Health/Nutrition, Family Services and Adult Education, 450 Columbus Boulevard, Suite 504, Hartford, CT 06103-1841.

This document is available at [https://portal.ct.gov/-/media/SDE/Nutrition/SFSP/Site\\_Visit\\_Form\\_SFSP\\_Preoperational.pdf](https://portal.ct.gov/-/media/SDE/Nutrition/SFSP/Site_Visit_Form_SFSP_Preoperational.pdf).

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Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov).

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